

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	✓						51		
2		✓					52		
3		✓					53		
4	✓						54		
5		✓					55		
6		✓					56		
7		✓					57		
8		✓					58		
9	✓						59		
10		✓					60		
11		✓					61		
12	✓						62		
13		✓					63		
14		✓					64		
15		✓					65		
16		✓					66		
17	✓						67		
18		✓					68		
19		✓					69		
20	✓						70		
21		✓					71		
22							72		
23		✓					73		
24		✓					74		
25	✓						75		
26		✓					76		
27		✓					77		
28		✓					78		
29							79		
30							80		
31							81		
32							82		
33							83		
34							84		
35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	8						TOTAL IND.		
TOTAL DEP.	20						TOTAL DEP.		
TOTAL CLAIMS	28						TOTAL CLAIMS		